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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. ASI0002-US		Total Pages:		
		First Named Inventor or Application Identifier Norman D. Geddes				
		Express Mail Label No.:				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231				
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)		6. <input type="checkbox"/> Microfiche Computer Program (Appendix)				
2. <input checked="" type="checkbox"/> Specification Total Pages 44 (preferred arrangement as set forth below) <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure		7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identify of above copies				
3. <input checked="" type="checkbox"/> Drawing(s) (35 usc 113) [Total Sheets] 10		ACCOMPANYING APPLICATION PARTS <ul style="list-style-type: none">8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)10. <input type="checkbox"/> English Translation Document (if applicable)11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations12. <input type="checkbox"/> Preliminary Amendment13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)14. <input checked="" type="checkbox"/> Small Entity Statement <input type="checkbox"/> Statement filed in prior application, Status till proper and desired15. <input type="checkbox"/> Certified Copy of Priority Document(s) (If foreign priority is claimed)16. <input type="checkbox"/> Other: _____				
4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages] 2 <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with box 17 completed) [Note Box 5 below]<ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application. See 37 CFR 1.63(d)(2) and 1.33(b).						
5. <input type="checkbox"/> Incorporation By Reference (usable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.						
17. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____						
18. CORRESPONDENCE ADDRESS						
<input type="checkbox"/> Customer Number or Bar Code Label or <input type="checkbox"/> Correspondence address below						
Name		George T. Marcou				
		KILPATRICK STOCKTON LLP				
Address		700 13th Street, N.W.				
		Suite 800				
City		Washington	State	DC	Zip Code	20005
Country		U.S.A.	Telephone	202.508.5800	Fax	202.508.5858
Name (Print/Type)		George T. Marcou			Reg. No.	33,014
Signature		R. McIntyre			Date	6/21/00

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FEE TRANSMITTAL Note: Effective October 1, 1997. Patent Fees are subject to annual revision.		Complete if Known	
TOTAL AMOUNT OF PAYMENT (\$) 456.00		Application Number Filing Date First Named Inventor Group Art Unit Examiner Name Attorney Docket Number	New Application Herewith Norman D. Geddes To be assigned To be assigned ASI0002-US

METHOD OF PAYMENT (check one) 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number: 11-0855 Deposit Account Name: KILPATRICK STOCKTON LLP <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR. 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance 2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other	FEE CALCULATION (continued) 3. ADDITIONAL FEES <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee</th> <th>Small Entity Fee (\$)</th> <th>Large Entity Fee</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English Specification</td><td></td></tr> <tr><td>147</td><td>2520</td><td>147</td><td>2520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>112</td><td>920</td><td>112</td><td>920</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1840</td><td>113</td><td>1840</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second Month</td><td></td></tr> <tr><td>117</td><td>950</td><td>217</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1510</td><td>218</td><td>755</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>2060</td><td>228</td><td>1030</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>310</td><td>219</td><td>155</td><td>Notice of appeal</td><td></td></tr> <tr><td>120</td><td>310</td><td>220</td><td>155</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>270</td><td>221</td><td>135</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1510</td><td>138</td><td>1510</td><td>Petition to institute a public use Hearing</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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SUBMITTED BY Typed or printed Name: George T. Marcou Signature: R. Whitcomb Date: 6/2/00		Complete (if applicable) Reg. No.: 33,014 Deposit Account User ID:	
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